



3731
JW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/664,970 Confirmation No.: 4613
Applicant : Rourke, et al.
Filing Date : September 18, 2000
Title : APPARATUS FOR DELIVERING ENDOLUMINAL
PROSTHESES AND METHODS OF MAKING AND USING
THEM
Group Art Unit : 3731
Examiner : Ho, Uyen T.
Docket No. : 702563.46
Customer No. : 34313

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action dated December 2, 2004, please amend the
above-identified application as follows:

04/25/2005 FIELDS 00000006 150667 09664970
01 FC:1E51 1E0.00 D.

CERTIFICATE OF MAILING
37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that that this paper or fee (along with any referred
to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal
Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Amendment,
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: 3/2/05

Saleen Day
Signature of Person Mailing Document

Applicant : Rourke, et al.
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Conclusion

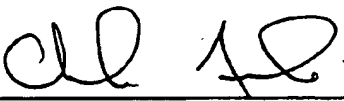
Prompt and favorable action on the merits of the claims is earnestly solicited.
Should the Examiner have any questions or comments, the undersigned can be reached at (949) 567-6700.

The Commissioner is authorized to charge any fee which may be required in connection with this Amendment to deposit account No. 15-0665.

Respectfully submitted,

ORRICK, HERRINGTON & SUTCLIFFE LLP

Dated: March 2, 2005

By: 
Charles C. Fowler
Reg. No. 39,675

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

91664970

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------|
| FOR | NUMBER FILED | NUMBER EXTRA |
| BASIC FEE | | |
| TOTAL CLAIMS | 36 minus 20 = | 16 |
| INDEPENDENT CLAIMS | 3 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

OR
OTHER THAN SMALL ENTITY

| RATE | FEE | OR | RATE | FEE |
|--------|--------|----|--------|--------|
| | 345.00 | | | 690.00 |
| X\$ 9= | | | X\$18= | 288 |
| X39= | | | X78= | |
| +130= | | | +260= | |
| TOTAL | | OR | TOTAL | 978 |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | 36 | = |
| Independent | 4 | 3 | = 2 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

SMALL ENTITY

OR
OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | | X\$18= | |
| X39= | | | X78= | 84 |
| +130= | | | +260= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | 36 | = |
| Independent | 4 | 5 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

RATE

RATE

| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | | X\$18= | |
| X39= | | | X78= | |
| +130= | | | +260= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | 36 | = |
| Independent | 4 | 5 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

RATE

RATE

| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | | X\$18= | |
| X39= | | | X78= | |
| +130= | | | +260= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

| | | | | | | | |
|---|--|--|--|--|--|---|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 | | | | | | Application or Docket Number <div style="font-size: 1.5em; font-family: cursive;">9/664970</div> | |
|---|--|--|--|--|--|---|--|

| CLAIMS AS FILED - PART I | | | | | SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY | |
|--|--------------|--------------|------------|------------|---|------------|
| | (Column 1) | (Column 2) | (Column 3) | (Column 4) | (Column 5) | (Column 6) |
| FOR | NUMBER FILED | NUMBER EXTRA | | RATE | FEE | |
| BASIC FEE | | | | | 345.00 | |
| TOTAL CLAIMS | 36 | minus 20= | 16 | X\$ 9= | | |
| INDEPENDENT CLAIMS | 3 | minus 3= | | X39= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | |
| | | | | TOTAL | | |

| CLAIMS AS AMENDED - PART II | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | |
|-----------------------------|--|------------|------------------------------------|---------------|---|----------------|
| | (Column 1) | (Column 2) | (Column 3) | (Column 4) | (Column 5) | (Column 6) |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE |
| | Total | 36 | Minus | 36 | X\$ 9= | |
| | Independent | 5 | Minus | 3 | X39= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | +130= | |
| | | | | | TOTAL ADDIT. FEE | |

| AMENDMENT B | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | |
|-------------|--|------------|------------------------------------|---------------|---|----------------|
| | (Column 1) | (Column 2) | (Column 3) | (Column 4) | (Column 5) | (Column 6) |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE |
| | Total | 36 | Minus | 36 | X\$ 9= | |
| | Independent | 5 | Minus | 5 | X39= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | +130= | |
| | | | | | TOTAL ADDIT. FEE | |

| AMENDMENT C | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | |
|-------------|--|------------|------------------------------------|---------------|---|----------------|
| | (Column 1) | (Column 2) | (Column 3) | (Column 4) | (Column 5) | (Column 6) |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE |
| | Total | 36 | Minus | 36 | X\$ 9= | |
| | Independent | 5 | Minus | 5 | X39= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | +130= | |
| | | | | | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.